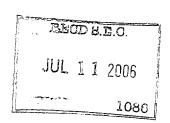
FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



OMB APPROVAL

OMB Number:

3235-0076

Expires:

May 31, 2005

Estimated average burden hours per response...... 16.00



Name of Offering (check if this is a	an amendment and name has cha	nged, and indicate ch	ange.)			
Offering of Membership Interests						
Filing Under (Check boxes that apply):	☐ Rule 504	☐ Rule 505	\boxtimes	Rule 506	Section 4(6)	☐ ULOE
	28202 details sylection of the control of the contr			874 8 . T		v walning a service of the service o
	A. BASIC	DENTIFICATIO	N DATA		* 4. g	1
1. Enter the information requested abo						
Name of Issuer (check if this is an a	imendment and name has change	d, and indicate chang	ge.)			
RC/Morgan Creek I, Associates Ll	LC					
Address of Executive Offices	(Number and Street,	City, State, Zip Cod	e)	Telephone	Number (Including Are	a Code)
101 Federal Street, 14th Floor, Bos				617-488-2		
Address of Executive Offices	(Number and Street,	City, State, Zip Cod	e)	Telephone	Number (Including Are	a Code)
Brief Description of Business						ILOEN
		····				00 to 71 74 2(44)
Type of Business Organization		_	_	_	1,	/ JOF # , co.d.
corporation	limited partnership, already		_	other (please		30
business trust	limited partnership, to be for		L	imited Liabili	ty Company	
Actual Date or Estimated Date of Incor Jurisdiction of Incorporation or Organiz	poration or Organization:		Actual		Estimate	192
Juniscipend of Incorporation of Organia	CN for Canada; FN for				MA	
	—	,	/	UL 2 8 20		
		, 4	/ 1		JU0	
GENERAL INSTRUCTIONS		11 11	\ 1	THOMSO	λſ	
Federal:		\mathcal{V}'		inoniso. Financia		

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77(d)(6).

When to File: A notice must be filed no later than 15 days after the first scale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state required the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION:

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who responded to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Page 1 of 9

		A. BASIC II	DENTIFICATION DATA							
2. Enter the information requirementsEach promotor of the enterty		ving: uer has been organized with	in the past five years;							
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.										
Each executive offi	• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and									
Each general and m	• Each general and managing partner of partnership issuers.									
Check Box(es) that Apply:	Promotor	☐ Beneficial Owner	Executive Officer	Director	⊠ Manager					
Full Name (Last name first, if	individual)				********					
RINET Company, LLC, M	Ianager of RC/M	organ Creek I. Associate	es LLC							
Business or Residence Address										
101 Federal Street, 14th Flo	or, Boston, MA	02110								
Check Box(es) that Apply:	Promotor	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, if	individual)									
Business or Residence Address	s (Number and Stre	et, City, State, Zip Code)								
Check Box(es) that Apply:	☐ Promotor	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last name first, if	individual)									
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)								
Check Box(es) that Apply:	Promotor	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, if	individual)	. Dr. Carlotte	111111111111111111111111111111111111111							
Business or Residence Address	s (Number and Stre	et, City, State, Zip Code)		alaka ara wila di sara manganan ara manganan ara manganan ara manganan ara manganan ara manganan ara manganan						
Check Box(es) that Apply:	Promotor	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, if	individual)									
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)								
Check Box(es) that Apply:	Promotor	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, if	individual)									
Business or Residence Address	s (Number and Stre	et, City, State, Zip Code)								
		•								
	(Use t	plank sheet, or copy and use	additional copies of this sh	eet, as necessary)						

					B.	INFORM	ATION A	BOUT OF	FERING					
1 :	Has the issue	r sold, or d	oes the issu	er intend to		on-accredite also in Ap						Ye □	-	No
2.	2. What is the minimum investment that will be accepted from any individual?									00				
3.	Does the offe	ring permit	joint owne	ership of a	single unit?							Ye □	_	No ⊠
1	Enter the info or similar ren listed is an as of the broker set forth the i	nuneration to sociated per or dealer.	for solicitat rson or age If more tha	tion of pure int of a broan in five (5)	hasers in c ker or deal persons to	been or wil onnection v er registere	l be paid o vith sales o d with the S	r given, dir f securities SEC and/or	ectly or ind in the offer with a stat	lirectly, any ring. If a p e or states,	y commissi erson to be list the nar	on : me		
Full N	Name (Last na	ıme first, if	individual))										
Busin	ess or Reside	nce Address	s (Number	and Street,	City, State	e, Zip Code	e)	Marrix.						
Name	of Associate	d Broker or	Dealer										· · · · - · •	
States	in Which Pe	rson Listed "All States"				it Purchase	rs				****			Ptotos
	AL	All States	AZ	AR	CA CA	CO	CT	DE	DC	FL	GA	HI	ID All :	States
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO	
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA	
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR	
Full N	Name (Last na	me first, if	individual))										
Busin	ess or Reside	nce Addres	s (Number	and Street	City State	Zin Code	<u> </u>							
			5 (1 · a · · · · · · · · · · · · · · · · · · ·		011), 5441	, <u>D.</u> p ccu								
Name	of Associate	d Broker or	r Dealer											
States	in Which Pe (Check	rson Listed "All States"				it Purchase:	rs							States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID	
	IL	IN	IA	[KS]	KY	LA	ME	MD	MA	MI	MN	MS	MO	
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA	
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR	
Full N	Name (Last na	ıme first, if	individual))			J111111 5							
Business or Residence Address (Number and Street, City, State, Zip Code)														
Name of Associated Broker or Dealer														
States	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)													
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID	
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO	
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA	
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Type of Security		Aggregate Offering Price	Amount Already Sold
Debt		\$_0.00	\$_0.00
Equity		\$ <u>0.00</u>	\$_0.00
	☐ Common ☐ Preferred		
Convertible Secu	rities (including warrants)	\$_0.00_	\$_0.00_
Partnership Inter	ests	\$_0.00	\$_0.00
Other (Specify M	Iembership Interests)	\$9,400,000.00	\$9,400,000.00
Total .		\$9,400,000.00	\$9,400,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
and the aggregate persons who have	of accredited and non-accredited investors who have purchased securities in this offering edollar amounts of their purchases. For offerings under Rule 504, indicate the number of e purchased securities and the aggregate dollar amount of their purchases on the total lines. ver is "none" or zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
Accredited Inves	tors	11	\$9,400,000.00
Non-accredited I	nvestors	0	\$0.00
Total	(for filings under Rule 504 only)		
	Answer also in Appendix, Column 4, if filing under ULOE.		
by the issuer, to	r an offering under Rule 504 or 505, enter the information requested for all securities sold date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of offering. Classify securities by type listed in Part C - Question 1.		
Type of Offering		Type of Security	Dollar Amount Sold
Rule 505			\$
Regulation A			\$
Rule 504			\$
Total			\$0.00
this offering. Exmay be given as	ement of all expenses in connection with the issuance and distribution of the securities in clude amounts relating solely to organization expenses of the insurer. The information subject to future contingencies. If the amount of an expenditure is not known, furnish an k the box to the left of the estimate.		
Transfer Agent's	Fees		\$0.00
Printing and Eng	raving Costs	\boxtimes	\$2,000.00
Legal Fees		\boxtimes	\$27,000.00
Accounting Fees			\$ <u>0.00</u>
Engineering Fees			\$0.00
Sales Commissio	ns		\$0.00
Other Expenses (identify)Mailing and distribution expenses	\boxtimes	\$1,000.00
	-		

complete at the Annual	C. OFFERING	PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	and total expenses furnished in respon	ggregate offering price given in response to Part C—Question 1 se to Part C—Question 4.a. This difference is the "adjusted gross		\$9,370,000.00
5.	each of the purposes shown. If the an	sted gross proceed to the issuer used or proposed to be used for nount for any purpose is not known, furnish an estimate and e. The total of the payments listed must equal the adjusted gross onse to Part C—Question 4.b above.		
			Payment to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		. \$\Bigsilon\$ \$25,000.00	\$0.00
	Purchase of real estate		. \$\square\$ \$0.00	\$0.00
	Purchase, rental or leasing and installa	ation of machinery	\$0.00	\$0.00
	• •	ngs and facilities		\$0.00
	Acquisition of other businesses (include offering that may be used in exchange	ling the value of securities involved in this for the assets or securities of another	□ #0.00	□ #0.00
	1 0 /			\$\)\(\\$0.00 \)
			□ #0.00	\$0.00 \$0.00
	5 - 1		. <u> </u>	□ \$ <u>0.00</u>
	Other (specify): <u>Investments</u>			
			\$ <u>0.00</u>	\$9,345,000
	Column Totals		\$25,000.00	\$9,345,000
	Total Payments Listed (column totals	added)	. \(\bigsize \\$9,370	0,000
e en quinting	April 1985 San	D. FEDERAL SIGNATURE		
	and the second s		ON THE STATE OF THE SECOND SEC	The control of the co
onstit		d by the undersigned duly authorized person. If this notice is filed un to the U.S. Securities and Exchange Commission, upon written request to paragraph (b)(2) of Rule 502.		
ssuer	(Print or Type)	Signature Date		
RC/M	organ Creek I, Associates LLC	Brean Merotto 7/	3/06	
Name (of Signer (Print or Type)	Title of Signer (Print or Type) CEO of RINET Company, LLC, Manager of RC/Morg.		-

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

· make or constraints	E. STATE SIGNATURE		and the second s
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠
	See Appendix, Column 5, for state response.		

- 2. The undersigned hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is field and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person

Issuer (Print or Type) RC/Morgan Creek I, Associates LLC	Brean Jarotto	Date 7/3/06
Name (Print or Type) Brian Rivotto	Title (Print or Type) CEO of RINET Company, LLC, Manager of R	.C/Morgan Creek I, Associates LLC

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	-	2	3			5			
	Intend to to no accred investo Stat (Part B-I	n- ited rs in e	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of amount pur (Part	Disqualification under State ULOE (if yes, attach explanation of waiver granted) Part E-Item 1)			
State	Yes	No		Number of Accredite d Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL							:		
AK									
AZ									
AR									
CA									
СО									
CT		Х	*\$150,000.00	1	\$150,000.00	0	\$0.00		X
DE	.,								
DC									
FL									
GA									
НІ									
ID									
IL									
IN	.,								
IA									
KS									
KY									
LA									
ME									
MD									

1	2	3		4			5		
	Intend to sell to non- accredited investors in State (Part B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) Part E-Item 1)	
MA	X	*\$9,250,000.00	10	\$9,250,000.00	0	\$0.00		X	
MI									
MN									
MS									
МО									
MT									
NE									
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
ОН									
OK									
OR									
PA									
RI									
SC									
SD									
TN									
TX									
UT									
VT									

1	2	3	4	5		
	Intend to sell to non- accredited investors in State (Part B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)	Disqualification under State ULOE (if yes, attach explanation of waiver granted) Part E-Item 1)		
VA						
WA						
wv						
WI						
WY						
PR						

^{*} Membership Interests

1534350.1